								Application or Docket Number						
	PATENT	RD												
Effective October 1, 2000									09694653					
CLAIMS AS FILED - PART I							SMALL ENTITY			•	OTHER THAN			
TO	OTAL CLAIMS		(Column 1)		(Column 2)		TYPE		OR					
TOTAL CLAIMS							RAT	RATE FEE			RATE	FEE		
FOR			NUMBER FILED		NUME	SER EXTRA	BASIC FEE 355.00		OR	BASIC FEE	710.00			
TOTAL CHARGEABLE CLAIMS			o minus 20=		. 30		X\$ 9=		OR	X\$18=	540.00			
INDEPENDENT CLAIMS			႕ minus 3 =		1		'X40=			OR	X80=			
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				1136	+135=			+270=	80,00		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR						
										OR	TOTAL	1,3700		
1-14-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	OTHER SMALL I			
A		CLAIMS REMAINING		HIGH	EST				ADDI-		RATE	ADDI-		
AMENDMENT		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	E	TIONAL FEE			TIONAL		
	Total	. 50	Minus	.5		=	X\$ 9	=	ree	OR	X\$18=	FEE		
	Independent	• 4	Minus	4		=	X40:	_			X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR	760-	/		
	·							=		OR	+270=			
								EE		OR	TOTAL ADDIT, FEE			
_		(Column 1)		(Colui		(Column 3)						•		
AMENDMENT B		CLAIMS REMAINING		HIGH NUM		PRESENT			ADDI-	1	1	ADDI-		
		AFTER AMENDMENT		PREVIO PAID		EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE			
	Total	•	Minus	••		-	X\$ 9	-		OR	X\$18=	- 165		
	Independent	•	Minus	***		0	X40=				X80=			
_	FIRST PRESENTATION OF MUL		LTIPLE DEPENDENT (CLAIM		A40=			OR	700=			
Best Available Copy								=		OR	+270=			
Deal Vidilable Coba							TOT ADDIT. F			OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colur		(Column 3)								
AMENDMENT C		CLAIMS REMAINING		HIGH		PRESENT		T	ADDI-	1		ADDI-		
		AFTER AMENDMENT		PREVIO PAID		EXTRA	RATE		TIONAL FEE		RATE	TIONAL		
	Total	•	Minus	••		=	X\$ 9=	1		OR	X\$18=	FEE		
	Independent	•	Minus	•••		-	-	┥		Un				
٧	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		X40=	1		OR	X80=			
+135= OR											+270=			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE														
1	ir tne "Highest Nur The "Highest Num	mber Previously Pa ber Previously Paid	iid For" IN THI I For" (Total o	S SPACE is Independe	s less that ent) is the	n 3, enter "3." highest number			ropriate box					